



**USDA Forest Service
Mount St. Helens National Volcanic Monument**

Climbing Mount St. Helens Permit Application



2004 Climbing Permit Application

Please fully complete this application. Do not send any money or check with this application!! Applications received prior to February 01, 2004, will be returned.

Preferred Summit Climbing Dates

First Choice: _____
 Second Choice: _____
 Third Choice: _____

Before selecting your three choices, make sure your preferred climbing dates are still available. Check the Climbing Reservations Calendar on the Mount St. Helens web site!

Contact Information

Daytime Telephone Number: _____

The address box below is used as an address label. Please type or print clearly your name, street address (or PO Box number), City, State and Zip Code if you want the US Postal Service to deliver this on time to you!

For Office Use Only

Permit Date: _____

Permit Number: _____

 Issuing Officer's Signature

Climbing Agreement

I agree to abide by all rules and regulations which apply to this area. I will do my best to see that everyone in my group does likewise. I understand that each member of my party must register before and sign out after the climb.

Signature: _____

Number in Group: _____ *Please note that group size is limited to 12 persons.*

Mail Your Completed Application To:

**Climbing Coordinator
 Mount St. Helens NVM
 42218 NE Yale Bridge Road
 Amboy, WA 98601**

Telephone: 360-449-7800
 Climbing Hotline: 360-449-7861